

503 571

As  
02/07/01  
28/11  
requester  
M. H. H. H.

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		20	5/11
FORMALITY REVIEW	W. H. H.	526	02/07/01
RESPONSE FORMALITY REVIEW	M. H. H.	780	5-22-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	5/13/01
2	5/13/01
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Claim	Date
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